

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000006111 (4)

1. Corporation Name
2072 CINNAMON, INC.



Principal Place of Business

1800 GLADES ROAD
SUITE 280
BOCA RATON FL 33431

Mailing Address

1900 GLADES ROAD
SUITE 280
BOCA RATON FL 33431

2. Principal Place of Business

~~SAMUEL SUSI, ESQ.~~
551 N.W. 77th STREET
SUITE 109
BOCA RATON, FL 33487

2a. Mailing Address

~~SAMUEL SUSI, ESQ.~~
551 N.W. 77th STREET
SUITE 109
BOCA RATON, FL 33487

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/19/1996

4. FEI Number

65-0635297

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

7. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

24

25

29

30

8. Name and Address of Current Registered Agent

SUSI, SAMUEL
~~1800 GLADES ROAD~~
~~SUITE 280~~
~~BOCA RATON FL 33431~~

81 Name

82 Street

83

84 City

~~SAMUEL SUSI, ESQ.~~
551 N.W. 77th STREET
SUITE 109
BOCA RATON, FL 33487

p Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Regis

FE

AND DIRECTORS IN 12

☒ Change

☐ Addition

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD
SUSI, SAMUEL
~~1800 GLADES ROAD~~
~~SUITE 280~~
~~BOCA RATON FL~~

1

1.

1.

1.

1.

1.

2.

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

2.

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

3.

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

4.

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)